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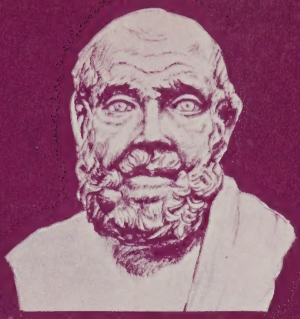

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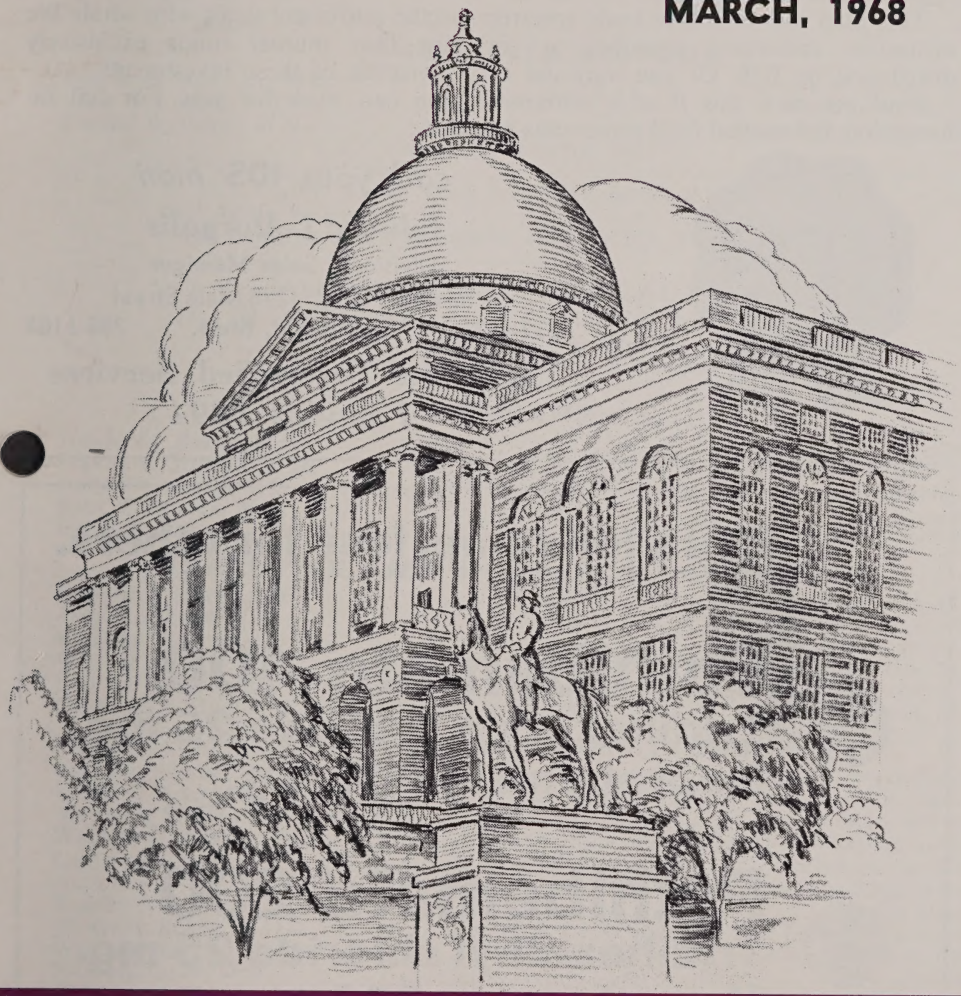

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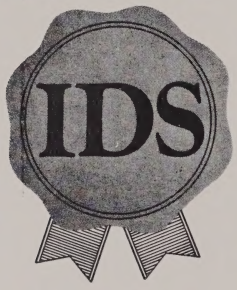

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The Hampden Hippocrat

Volume XXIV No. 3

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ANOTHER BATCH

by

Karel J. Susat, M.D.

HDMS LEGISLATIVE COUNCILOR

Looking at the *Legislative Hopper* this year, we may note with some relief that for the first time in years we are not faced with any major battles on behalf of the private practice of medicine, albeit in its present, already badly mutilated form.

No further too serious inroads are being pushed, at least not this year, into our positions so that we may have little time to lick our wounds from past battles lost, and to find within ourselves, and among ourselves, the ways and means, the arguments, and the ammunition for the future onslaughts which will inevitably follow in due course.

I should hope that we learned something from our past mistakes, when organized medicine did virtually nothing to actively inform and educate public opinion on the problems and issues, while the public was still willing to listen. For, once the politicians take the floor with their vote-getting gargantuan give-away programs, it is much too late to stop the hysterical stampede after the promised "goodies."

It is *now, before* the politicians and the unions open up their guns again for more "free" government-controlled services, that we should clearly and diligently demonstrate to each of our patients, and to the public at large, what a horrendously expensive mess they wound up in after the first two "victories" for socialized medicine.

Let us collect and constantly publicize actual figures of hospital over-utilization by Medicare and Medicaid patients, at the expense of the working men and women, and of the fantastic cost of these programs. Let us demonstrate the abysmal difference between the promised cost and the actual cost of these programs. Maybe the public will then think twice before falling for another "give-away" scheme. And above all, let us clearly demonstrate that we, as doctors, have no axe to grind, that since times immemorial, we were glad to provide *free* services for the really indigent, that we aren't the losers in these programs, but that our objections are based on the public's interest, not on ours.

SOME TIDBITS

A meeting of the M.M.S. Committee on Legislation was held on January 17, 1968. During the day-long, 7-hour session, 118 bills were considered and debated. It was voted that 31 would be supported, 35 opposed, and on the rest, no action would be taken. The summary of the *Legislative Hopper* appears on another page of this issue, and more detailed information may be obtained from this writer on request (see Page 8). To mention a few bills of more common interest:

S 655 and H 3032 Deal with qualification requirements for the registration of chiropractors, namely, those licensed in other states, and the acceptability of the diploma of the National Board of Chiropractic Examiners.

This writer vehemently advocated ignoring these Bills since we disapprove *any and all* qualifications of chiropractors. By opposing the acceptance of out-of-state licenses, we directly imply that our own state licenses are

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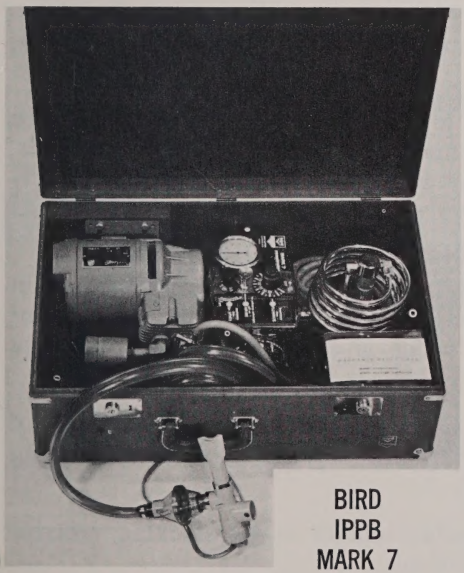

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better and acceptable, which, of course, they are not. Unfortunately, after prolonged debate, the majority voted to oppose these Bills in the belief (totally erroneous in my opinion) that the Society should "protect the public from poorly qualified chiropractors" — thus tacitly implying that "our own" chiropractors are well qualified.

H 271 Requires druggists to have facsimile signatures of prescribing physicians. Consequently, your prescription could not be filled out-of-town. Oppose!

S 642 Requires that all harmful drugs be labeled with both trade name and generic name of drug.

Frequently, we may not wish the patient to know what he is taking (e.g., tranquilizers, etc.). Oppose!

H 3302 Would fine us up to $1,000 for leaving narcotics in an unattended motor vehicle, even locked. Oppose!

H 710 Protects patients' confidential communications to psychiatrists *and other psychotherapists*. Believe it or not, a "psychotherapist" is defined as "a person licensed to practice medicine, who devotes a substantial portion of his time to the practice of psychiatry or a person, by training or experience skilled in the diagnosis and treatment of mental or emotional problems, *or a person reasonably believed by the patient to be qualified under either of these headings.*" Oppose!

H 876 Wants a commission to investigate management and operation of hospitals. The commission would consist of nine politicians and, of course, no physicians. Oppose!

H 2826 Wants to create a board of five members to regulate the cost of hospitalization. This board would be appointed by the governor, and its decision would be final and binding on all hospitals. Oppose!

H 3447 Compels a doctor to be in attendance at all times in all hospitals. Oppose!

H 2104 Would change the present law to allow a physician to prescribe birth control drugs, or devices, to unmarried as well as married persons.

The Committee voted to support this Bill in the public interest, primarily since unwed mothers represent a huge percentage of the welfare load, as well as creating serious social problems!

H 2366 Would again, like last year's Bill, extend that statute of limitations in malpractice cases to commence only within two years after the injured party has knowledge of the facts which give rise to a cause of action. Oppose!

S 613 Would prohibit the issuance, by the Registry of Motor Vehicles, of M.D. license plates to osteopaths who now are allowed to use them and thus deceive the public. Support!

S 235 Would provide instruction in public schools on sex, smoking, venereal diseases, and other social problems.

We support this Bill since we feel that a large percentage of parents are unqualified to do so!

H 627 Would require all employers of fifty or more persons, involving use of machinery, to employ a full-time registered nurse. Oppose!
Registered nurses are needed much more in hospitals.

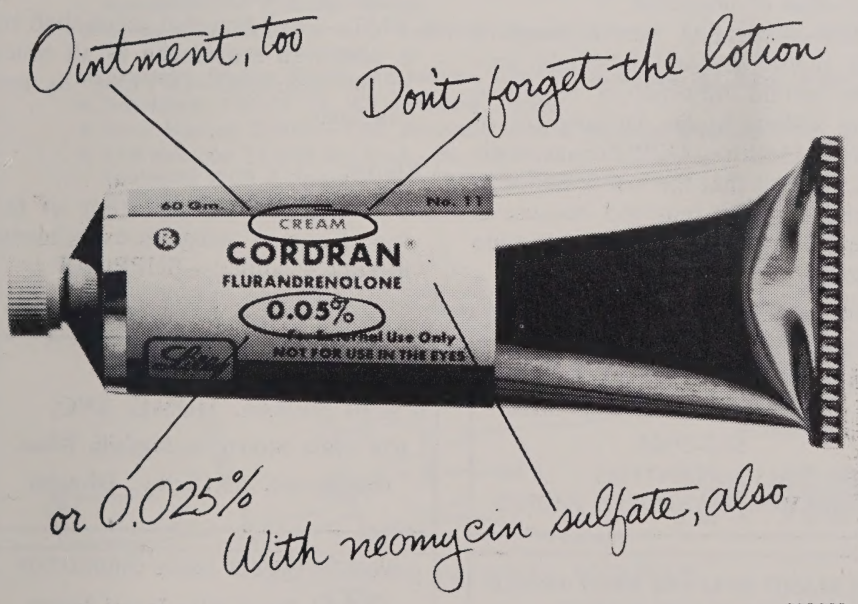
H 402 and H 565 and S 607 Would have Public Health services established for the treatment of chronic renal diseases, glaucoma, and disabling respiratory diseases, respectively. Oppose!
Pretty soon we would have free public services for every disease in the book.

H 1223 Would require us to provide health certificates, including EKG's and EEG's, for every pupil participating in interscholastic sports. Oppose!

S 590 Would have Public Welfare contract with Blue Cross — Blue Shield for welfare recipient health services. Support!

H 1351 Wants a commission of ten, including only one physician to investigate Medicare and Medicaid fees. Oppose!
All such information is available from Blue Shield already.

It will be up to every one of us to help to pass, or to defeat, any Bill that we feel strongly about. But let us not get caught napping again, for post-mortems after the act won't do us any good.



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LEGISLATIVE HOPPER

The following are some of the bills under consideration this year in the General Court of Mass. The number of the bill, a brief description thereof, and the recommendation made by the MMS Legislative Committee are given. Bills upon which the Committee voted "No Action" are not listed. For more information, Dr. Karel J. Susat, Chairman of the HDMS Legislative Committee, or the Society's office should be contacted.

DRUGS

H 271—Requiring druggists dispensing physicians' prescriptions to have facsimile signature of said physicians. —OPPOSE as impossible to implement.

S 642—Providing that harmful drugs bear a label containing both the trade name and the generic name of such drug or drugs.—OPPOSE as impractical. Labelling should be at discretion of physician.

H 1727—Repealing the requirement that physicians and hospitals provide certain information regarding drug addicts to the Department of Public Health.—OPPOSE as written. Suggest that the last sentence in current law be removed because it opens up the records to any state agency.

H 1911—Providing for a study of the laws of the Commonwealth re. marijuana.—FAVOR.

H 3302—Further regulating the possession and control of narcotic drugs.—OPPOSE as impractical.

H 3427—Relative to cough medicine. —OPPOSE.

HOSPITALS

H 876—Providing for an investigation and study of the internal management and operation of the various hospitals, infirmaries and public medical institutions licensed in Massachusetts.—OPPOSE.

S 37—Further regulating payments to hospitals by non-profit hospital service corporations.—OPPOSE.

S 611—To assure a quota of terminal care beds in every public hospital. —FAVOR.

H 2826—Creating a board to regulate the cost of hospitalization. — OPPOSE as unnecessary.

H 3447—Providing that there shall be a doctor in attendance at all times in all hospitals.—OPPOSE as impractical.

LEGAL

S 594—Providing for a study of the use of human beings in experiments in state facilities.—SUPPORT.

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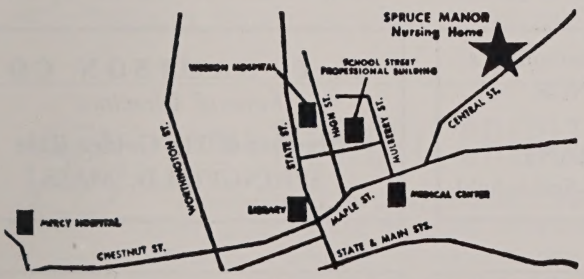

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PUBLIC-AIDED PATIENTS ACCEPTED

H 873—Relative to autopsies. —OPPOSE.

S 558—Granting tenure of office to certain medical examiners and associate medical examiners. —SUPPORT.

H 2104—Relative to the authority of registered physicians or pharmacists to furnish drugs or articles for the prevention of pregnancy or conception.—FAVOR.

H 2432—Relative to the keeping of hospital records. —OPPOSE.

H 2363—Relative to the admissibility into evidence of physician's medical reports.—OPPOSE.

H 2366—Changing the statute of limitations covering malpractice cases —OPPOSE.

H 2008—Extending the statute of limitations in certain malpractice cases. —OPPOSE.

H 3189—Requiring consent for the performance of autopsies in certain cases.—OPPOSE. Check with medical examiners.

MEDICAL PRACTICE

H 269—Requiring applicants for registration as physicians to have completed an internship of one year in a duly accredited hospital.—FAVOR.

H 479—Increasing the penalty for the unauthorized practice of medicine. —FAVOR.

S 537—Authorizing certain physicians employed by the Commonwealth to organize and to bargain collectively with state departments relative to working conditions.—OPPOSE.

S 641—Providing for the indefinite renewal of licenses of foreign physicians working in state hospitals, state schools or other mental health or retardation facilities.—FAVOR.

S 613—Prohibiting the issuance of M.D. License plates to any physician who is not the holder of a degree of Doctor of Medicine. —FAVOR.

H 1323—To provide compensation to medical consultants in state service.—FAVOR.

H 2265—Providing for the use of generic names for prescriptions drugs.—OPPOSE.

MENTAL HEALTH

H 710—To protect patient's confidential communications to psychiatrists and other psychotherapists. —FAVOR, but oppose inclusion of psychotherapists.

H 718—To provide a defense of the disease of alcoholism to a criminal charge of public drunkenness or of being a common drunkard and to provide a program of treatment and rehabilitation for alcoholics. — APPROVE.

H 78—An act providing for additional compensation for certain supervisory

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and teaching personnel in the Department of Mental Health.—FAVOR.

H 79—An act increasing fees for physicians authorized to make certain mental examinations.—FAVOR.

H 84—An act providing that recreational programs for physically and mentally retarded be extended to include certain additional facilities in the Department of Mental Health.

H 85—An act relative to the designation of certain area directors to serve as head of comprehensive centers in the Department of Mental Health.—FAVOR.

EDUCATION

H 895—Establishing a Board of Nursing and for other purposes.—OPPOSE. Board should remain as is.

S. 226—Establishing the Commonwealth School of Nursing.—OPPOSE as unnecessary.

S 235—Providing for instruction in the public schools on sex, the effects of smoking and the causes and preventions of venereal diseases and certain other social problems.—SUPPORT in principle.

S 218—Authorizing the Board of Higher Education to award scholarships to students in order to pursue a course of study in medical technology.—FAVOR.

H 627—Requiring certain manufacturing, mechanical or mercantile establishments to employ a registered nurse.—OPPOSE as impractical.

H 233—Providing that the Commonwealth reimburse cities and towns for part of the cost of operating nursing schools. — OPPOSE. (National legislation in process.)

S 606—To regulate schools for training medical laboratory technologists. —FAVOR.

PUBLIC HEALTH

H 402—Authorizing the Department of Public Health to establish and maintain services for the care and treatment of persons suffering from chronic renal diseases.—OPPOSE. (Federal comprehensive health care act being implemented by state.)

H 453—Requiring that high school students be furnished information relative to the harmful effects of narcotic drugs.—SUPPORT.

H 565—Authorizing the Department of Public Health to establish Glaucoma Clinics throughout the Commonwealth.—OPPOSE as impractical.

S 589—To vest in the Department of Public Health the responsibility for the administration of the Massachusetts Hospital School.—SUPPORT.

H 183—Authorizing the county commissioners of Hampshire County to expend funds for plans and specifications for a chronic disease facility

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in said county.—OPPOSE. (Comprehensive health care act.)

S 202—Requiring the County Commissioners of Worcester County to make use of the Worcester County Hospital for certain other purposes than the treatment of tuberculosis.—OPPOSE. (Comprehensive Health Care Act).

H 988—Providing for the return and registry of birth certificates.—OPPOSE. Unnecessary. Present situation satisfactory.

S 658—Providing for an investigation and study by a special commission relative to the confinement of intoxicated persons and alcoholics.—SUPPORT.

S 607—Relative to the care and treatment of disabling respiratory diseases. — OPPOSE. (Comprehensive Health Care Act.)

S 670—Providing for comprehensive financial assistance for health and medical care facilities construction and for programs of health manpower training and establishing a division of health services planning and review. —FAVOR in principle. More physician representatives on Advisory Council.

S 671—Establishing a state council for comprehensive health planning, areawide planning councils and defining their powers and duties.——FAVOR in principle. Request more physician representation.

H 3430—Regulating the reporting of births of mongoloid children.—OPPOSE as time limit is impractical.

SAFETY

S 454—Requiring medical reports on certain persons to be made to the Registrar of Motor Vehicles.—OPPOSE as impractical, violation of physician-patient relations. Prefer H 1668 instead.

S 455—To require a periodic eye examination of every licensed driver. —OPPOSE as impractical.

S 352—Lowering the Prima Facie level of presumption of operating under the influence of intoxicating liquor to ten one hundredths of the percentage by weight of alcohol in the defendant's blood. — SUPPORT as realistic.

S 868—Requiring analysis of blood samples in cases of motor vehicle fatalities.—SUPPORT.

H 1223—Relating to the physical condition of pupils participating in interscholastic sports. — OPPOSE as impractical.

H 1668—To establish a medical advisory board.—SUPPORT.

H 1669—Allowing the submission of blood samples in cases of motor vehicles fatalities.—SUPPORT.

H 2064—Providing for periodic examination of persons licensed to operate motor vehicles. — SUPPORT in principle.

WELFARE

S 590—Authoring the Department of Public Welfare to contract with prepaid medical care plans for welfare recipient health services. — SUPPORT.

H 1351—Providing for an investigation and study by a special commission relative to the services rendered and rates charged by physicians and surgeons to the beneficiaries of Medicare and Medicaid.—OPPOSE as unnecessary.

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EXECUTIVE COMMITTEE MEETING

(Highlights)

The Executive Committee met on February 20, 1968 in the conference room of the HDMS. Present were Drs. Barnes, Griffin, Anton, Mozden, Moore, Beauchamp, Jr., Bloom, Nero, and Mrs. Purdy. In the absence of Dr. Baker, Dr. Barnes chaired the meeting and called it to order at 8:10 P. M.

The minutes of the January meeting were read, and with one correction they were approved as read.

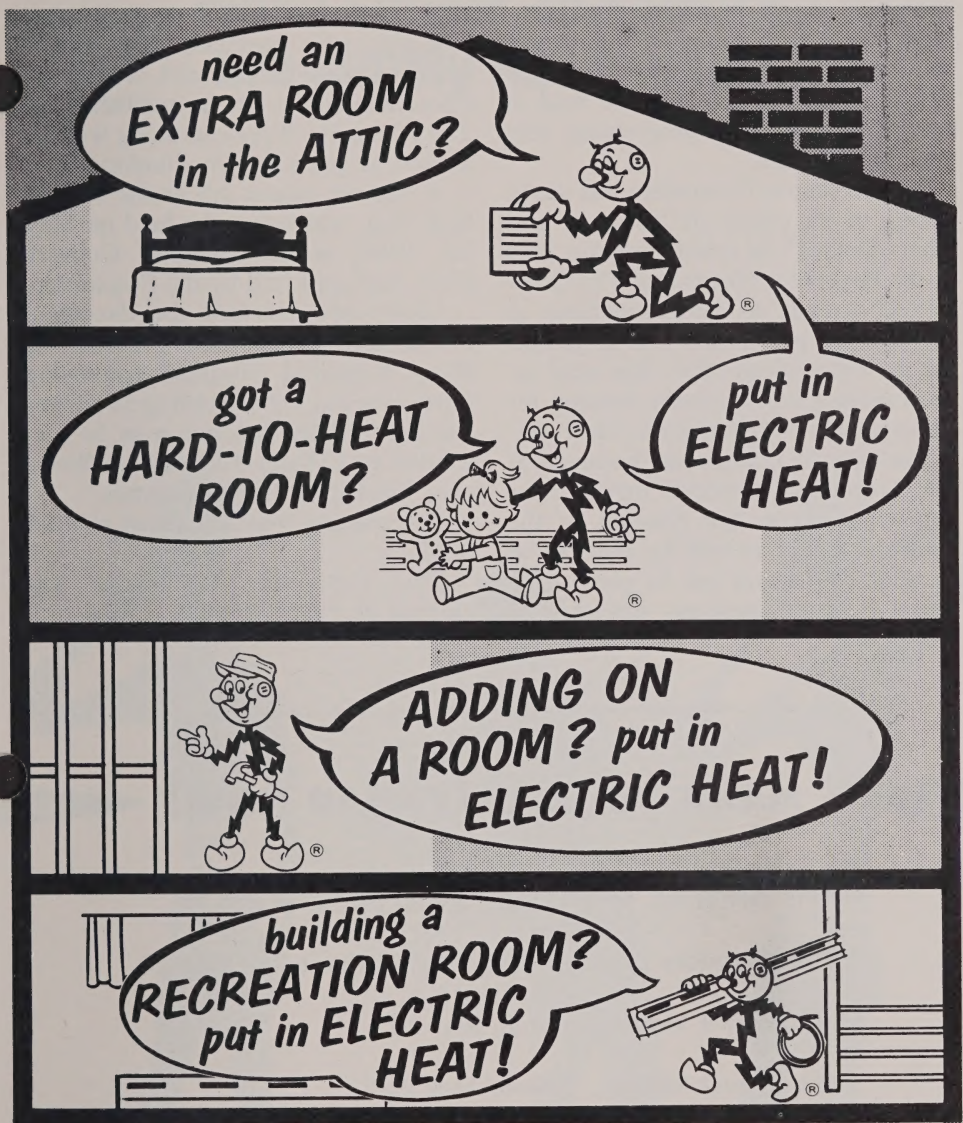
A letter from Dr. Atamian, Secretary of the Springfield Academy of Medicine, was read, and it was agreed to support in every way possible the Symposium to be held on April 20, 1968.

Dr. Tillman, Chairman of the Members' Insurance Committee, requested approval of the Executive Committee regarding a new "umbrella coverage" type insurance. The Committee approved.

A letter from Police Chief, John F. Lyons of Springfield regarding narcotic prescriptions was read as informational. This has been referred by the Police Chief to the Board of Registration in Medicine.

A letter sent by Dr. Baker to Mr. Gifford was read regarding the renal dialysis program at The Springfield Hospital. The Committee approved Dr. Baker's letter extending the cooperation of the Medical Society in the venture of the renal dialysis unit.

Mrs. Purdy reported on the number of meetings held during the last month in the conference room of HDMS. She also reported on the special meeting on alcoholism and the program for presi-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dents and secretaries of the district societies held in Framingham in which she participated. The plans for the "Health Fair", which is to be held in March of 1969, are progressing very well at this time.

The Executive Committee was unanimous in its praise of "Doctors and Their Dollies", a social program held at the Highpoint Motor Inn. The Committee extends its congratulations to the talented performers and its thanks for the tremendous effort that went into preparing such a lovely evening for the members and their wives. However, it was also the unanimous sentiment of the Executive Committee that if other similar functions are planned in the future, it would be best for same to be in addition to and not in place of a Society's usual business meeting, of which there are only four in a year.

Under old business, Dr. Susat's letter was again read and considered informational as it is published in *The Hampden Hippocrat* along with an answer as given by Dr. Dunlop.

A $25.00 annual gift to the HDMS Golf Day, which is to be held on May 22, 1968, at the Elmcrest Country Club, was approved by the Committee.

Under new business the Executive Committee studied the problem of Wing Memorial Hospital employing physicians currently based at Westover Air Force Base. A letter is to be forwarded to Colonel McGeary at Westover Field regarding this matter.

The meeting was adjourned at 9:35 P. M.

The Grievance Committee adjourned at 10:10 P. M.

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HDMS ANNUAL MEETING, APRIL 23

HDMS Executive Committee Meetings, April 16 and May 14.

MMS Council Meeting, Boston, May 20

MMS Annual Meeting, Boston, May 21-23

MMS Annual Meeting of the Fellows, Boston, May 22

American Psychosomatic Society, Boston, March 29-31

American Society of Internal Medicine, Boston, March 29-31

American College of Physicians, Boston, April 1-5

American Psychonalytical Society, Boston, May 10-13

American Psychiatric Association, Boston, May 13-16

AMA Annual Meeting, San Francisco, June 16-20

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M.M.S. COUNCIL HIGHLIGHTS

The stated meeting of the Council of the Massachusetts Medical Society was held in Boston on February 7, 1968. The meeting was called to order by the President, Dr. Donald A. Nickerson, at 10:10 A. M. Representing Hampden District were the following councilors: Drs. Allan, Ayres, Franseen, Griffin, Hayes, Johnson, Kelly, LaMarche, Miner, Ryan, Simpson, Susat, and Tillman. The obituary of Dr. Howard F. Root was read and there was a moment of silence in his memory.

President Nickerson ruled that only councilors elected by their respective district societies, including presidents, secretaries, and certain other who are present by election would be allowed to vote. At this point, Dr. Simpson moved that those members who had been known as ex-officio councilors and who have no vote be allowed to speak without permission. This motion was carried. Several interim appointments were announced to committees.

Under old business, negotiations with Mr. Robert F. Ott, Commissioner of Public Welfare, were reported.

The report of the Executive Committee was presented and was purely informational.

The Committee on By-Laws and Council Rules presented its report, and there ensued a long discussion on many details. The problem here is that our present by-laws are in conflict with the statutes of the Commonwealth of Massachusetts, and efforts are being made to correct this situation. Dr. Carl Bearse suggested that efforts be made to get the Legislature to make necessary changes in the statutes to fit with our by-laws and table all further consideration of by-law changes. His motion was defeated and the Council returned to the business of by-law changes.

A resolution presented by Middlesex South District Society, that the Committee on Finance be composed of the district treasurers of the several district medical societies was defeated since it would make the Committee too large and cumbersome. Several other proposed changes were presented and were either defeated or referred back to committee. Approved was the

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change in Chapter IX to read "These by-laws may be amended by a majority vote at any annual meeting of the Society, provided that the proposed amendment or amendments shall have been submitted previously in writing to the Council for its recommendations, if any, and forwarded with these recommendations of the Council, if any, to each Fellow, together with the program of the meeting of the Society at which they are to be considered". Also approved was a change in Chapter IV, Section 2, reading "The Council shall consist of councilors elected by the district societies". This change eliminated the ex-officio councilors provided for previously. However, a change was made in Chapter III, Section 6, which provided that each district shall have one councilor for each 25 fellows, with a minimum of 6 councilors. Under this new amendment, each district may elect in addition "those of its fellows while serving as president, vice-president, president-elect, secretary, treasurer, assistant treasurer, chairman of a standing committee of the Society, president of a district society, secretary of a district society, editor of the *New England Journal of Medicine*, President and Executive Director of the Massachusetts Medical Service. Commissioner of the Massachusetts Department of Public Health, Commissioner of the Massachusetts Department of Mental Health, President of the American Medical Association, or those who have served as President of the Society, or of the American Medical Association, provided they are members of the Society". A change in Chapter IV, Section 4, was voted, providing that "councilors only shall be eligible to be elected to the office of president, of president-elect, and of vice-president". Also approved was a change in Chapter VII, Section 17, to read "it shall submit to the Council for recommendations, if any, all proposed amendments to the by-laws as provided in Chapter IX".

The Committee on Medical Services recommended that the MMS rescind its previous approval of the phrase "vaginal examination is the sole responsibility of the physician". This phrase was contained in a joint statement with the Massachusetts Nurses Association. Instead, a new resolution was approved so that a physician would still be responsible for vaginal examinations during labor, but he may delegate such examinations to a properly trained registered nurse. Also approved was a resolution inviting the Massachusetts Hospital Association, the Massachusetts Chapter of the American College of Surgeons, The Massachusetts Chapter of the American Academy of General Practice to join with the MMS to publicize the need for ad-

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ditional trainees in nursing. Furthermore, it was voted that the MMS "offer encouragement and help in planning the improvement of diploma school programs to educational, health, and welfare authorities, professional and volunteer groups in the health field, and in local planning bodies". The Massachusetts Nurses Association is invited to participate in these activities.

A statement of principles governing physician-pharmacist relationships was adopted.

The recommendation that the Committee on Prevailing Fees be made a standing committee was disapproved after Dr. Allan Johnson reminded the Council of previous policy. It was his opinion that the Committee had not been in existence long enough to warrant its being made a standing committee at this time. However, it was voted to "approve of the concept of establishing informed tenure for the committee by staggering terms of service".

Several other committees presented informational reports requiring no action. Among these was a report of the AMA Delegates, indicating that complete agreement was reached by all the New England delegates in support of the candidacy of Dr. Donald R. Hayes of Springfield for election to the AMA Board of Trustees. The MMS and the HDMS, in particular, are extremely proud that Dr. Hayes is a candidate for this important position.

Reconvening after lunch, the Council considered the report of the Committee on Finance and the proposed MMS budget for 1968. Many questions were raised as to the program of the Postgraduate Medical Institute, particularly in the light of a 40 thousand dollar request from the Society this year. Dr. McCombs, President of the P.M.I., explained that 20 thousand more was requested this year to "synchronize" the varying fiscal years of the P.M.I. and the MMS and to provide an operational reserve since there are delays in reimbursement for certain services contracted with various governmental agencies. After considerable discussion, the grant to the P.M.I. was approved; however, it was also voted that the expansion and funding of the P.M.I. as it relates to the MMS be evaluated by and recommendations be made by a special committee of the MMS.

The Council also voted a contribution of $9,000 to the AMA-ERF. The said sum represents $3,000 unrestricted for each of the 3 medical schools now operating in Mass. In addition, a contribution of $300 was voted to the SAMA Chapter at B.U. School of Medicine. It was also voted to increase to 20% of previous year's wages the retirement bonus plan allotment for those MMS employees over

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45 years of age at the time of employment. All in all a budget of $345,233 was approved for 1968. A net surplus of $150,819 was realized for 1967.

Dr. Whitney reported for the Committee on Mental Health. Although the Committee's report was informational, Dr. Whitney warned that new legislation was granting more and more power to the Mass. Dept. of Mental Health in the control of psychiatry in all its aspects. Moreover, he made a plea to keep lay people out of dabbling in psychotherapy which is the psychiatrists' perogative.

Under suspension of rules, a resolve submitted by the Norfolk DMS recommending Dr. Frechette to Governor Volpe for reappointment as Commissioner of Public Health was adopted.

Dr. Faulkner reported for the Committee on Publications on the current status of the *New England Journal of Medicine* in relation to the new Internal Revenue Service's regulations pertaining to income. In accordance with the latter, the *Journal* is not considered exempt. After consultation with legal counsel, the Committee recommended that the Council vote to pay taxes on the *Journal's* income under protest and to challenge in the Courts the ruling of the IRS again. It was so voted.

After being informed concerning the Committee of Fellows of the MMS's petition for a declaratory judgment as to the status of MMS officers who were elected in spite of not being elected councilors, the Council voted to pay the legal costs and expenses of the suit against the said officers from the Society's funds.

Dr. Dunlop, President of Mass. Blue Shield, briefly outlined his organization's efforts in the immediate past to implement a program of paying physicians usual and customary fees. Recent developments in regard to the Master Medical Plan, which today includes 1.1 million persons in Mass. or about 1/3 of Blue Shield members in Mass., have been surprisingly encouraging. When the new high option plan

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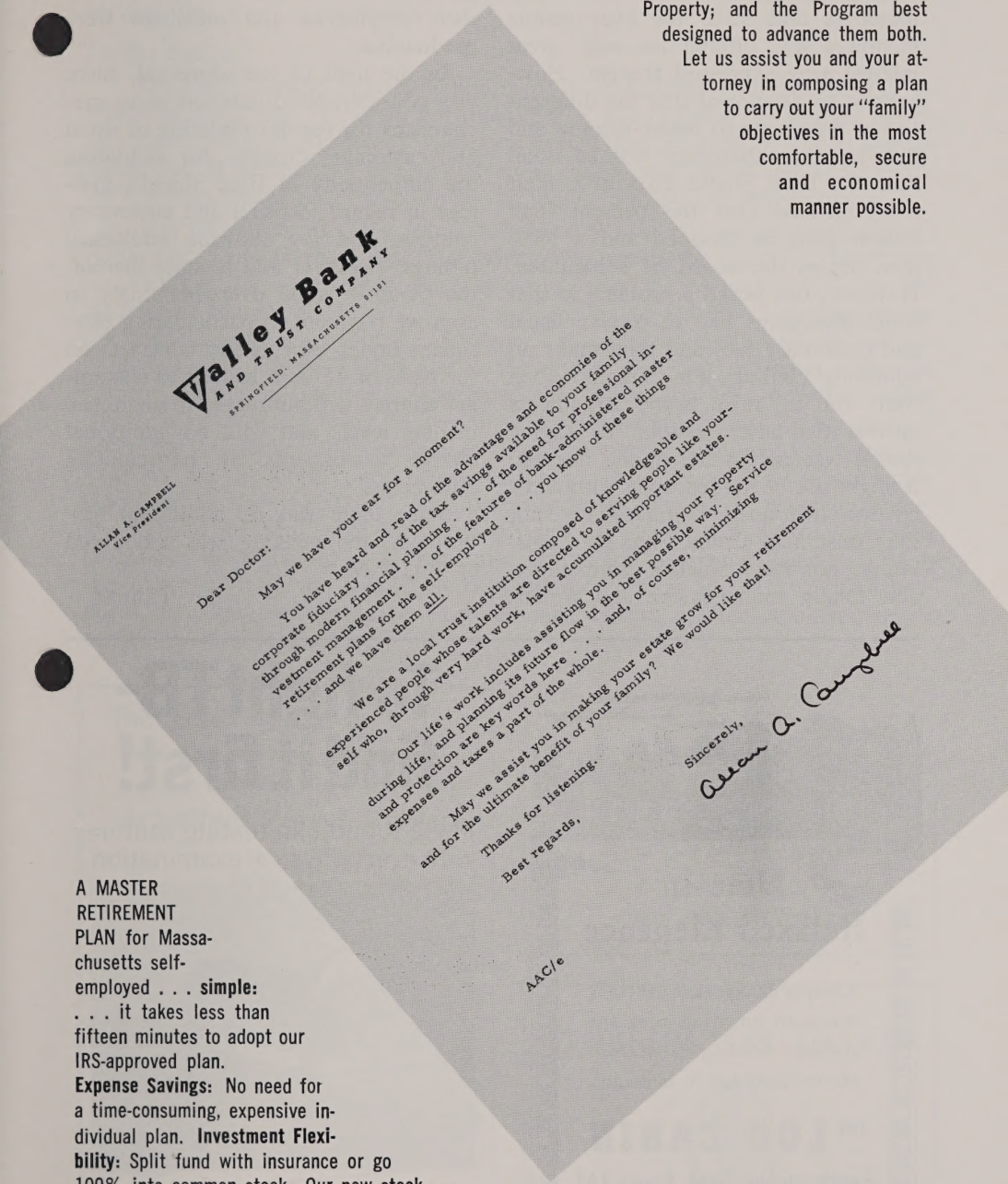

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which provides 80% of usual and customary charges for under-income members and 95% for over-income members was offered for sale, great interest was expressed therein. However, it so developed that the differential in premiums to under-income and over-income subscribers was so small that the Blue Shield Executive Staff recommended that the present high option plan be dropped and a 95% plan across the board be substituted. However, this raised a problem in that some physicians like to receive usual and customary fees and then make an additional billing. Dr. Dunlop then went on to raise some arguments against the latter position by saying that it was not in the public interest; it might not be looked upon with favor by the Insurance Commissioner nor the Consumers' Council nor the Legislature; nor Blue Shield's competitors; and finally management and unions would not accept markedly increased premiums unless the medical costs to their employees and members were predictable.

In the light of the aforesaid, there was considerable discussion as to mechanisms for regular updating of usual and customary charges, for validating the authenticity of Blue Shield's findings in regard to usual and customary charges, and for allowing additional billings. However and in spite thereof, the Council voted overwhelmingly to approve payment to participating physicians under Blue Shield contracts on the basis of 95% of usual and customary charges without regard to members' income levels and with no additional charge to patients by participating physicians.

Since there was no additional new business, the meeting was adjourned at 4:05 P.M.

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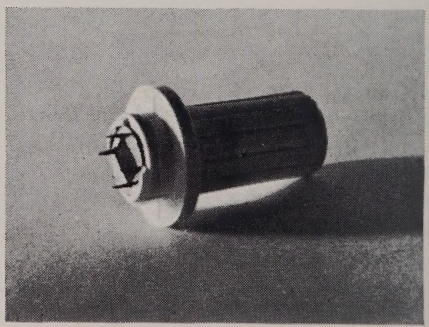

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MORE ON THE ACADEMY

To the Editor:

Dr. Pace's Article in your February issue—"Academy Whither Goes't?"—was most gratifying. Although not indicated, it was obviously prompted by my own item "Whither Academy?"—carried in the January issue of *The Hampden Hippocrat.* It is sincerely hoped that many others will follow suit and express their views in your pages concerning the crucial situation at the Academy.

Having served with Drs. John Turner and Wayne Barnes on the Academy's Relocation Committee, I am in a position to recall the exact circumstances surrounding the removal of the Academy from the Women's Club to the Springfield Municipal Hospital in 1954. Contrary to Dr. Pace's suggestion, no one then had any fears that the Academy " . . . will be swallowed up and lose its identity if it moves." There was no reason for such fears because, unlike the current Technical Institute proposition, the transaction was negotiated then strictly on a business basis. In return for a dollar-a-year rental for at least ten years, the Academy obligated itself to construct within the alloted space suitable quarters for its library and office facilities. The cost of that construction amounted to about $20,000. The Academy further agreed to make its library available to the Municipal Hospital's physicians, nurses, technicians and other personnel. What should be stressed also is that the Academy library is just as important today to the Municipal Hospital for cultural and accreditation purposes, as it has ever been. The Hospital's own library, we find upon inquiry, is practically non-existant.

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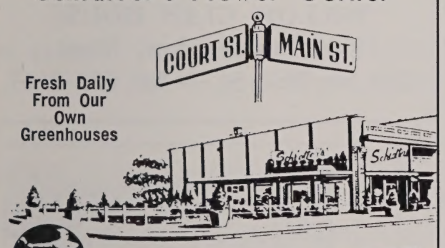

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The Academy Library, it should be recalled, was established primarily to serve our profession. Others, and especially students from surrounding schools, always have been and always will be welcome. However, to remove the Academy library to one of these schools is something entirely different. It would, in my opinion, prove ruinous not only to the library as we know it, but to the entire Academy of Medicine as well. Such a move becomes even more objectionable when we consider that the Institute's meeting place offers a mere 75 seats. Even now the spacious Municipal Hospital Auditorium gets well filled whenever the program is interesting enough or when outside groups such as nurses, technologists, AAAS, etc. are invited to attend. Our purpose should be to encourage and to increase attendance rather than to restrict it because of a limited seating capacity.

Dr. Pace cries "change, change!" We all favor change providing it is in the right direction. Once before the Academy was invited to transfer its library to another institution, but wisely declined to do so. The change we favor is the merger of the Academy with the HDMS. This should be accomplished soon, before time runs out. Such an affiliation would automatically make every District member also a member of the Academy, thus receiving 100% professional support. This should be our chief concern at the moment; all else can wait.

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"Chansons Intimatiques" by Dr. Roger E. Parenteau

The costumes gleamed, the spots accentuated, the music alternately soothed and stirred, the abdominal adiposity quivered, the eyes gleamed and glazed, and enthrallment reigned throughout as the program of the winter meeting of the H.D.M.S. unfolded before an audience of 257 at the High Point Motor Inn, Chicopee, on February 9, 1968. How wonderful it is to find such talent amongst physicians and their wives particularly when drawn out by such stimulating spark plugs as Dr. Roger E. Parenteau and his associates. The presentation was conceived and produced by Dr. Parenteau, written by Mr. Sam Hoffman and directed by Mr. Bernie Lally. Mr. Edward Cerveny tickled the cochleas with his fine arrangements and direction of the music. Mrs. Lawrence V. Selden, assisted by Mrs. Theodore J. Kord, dazzled the retinae with artistic backgrounds, and sparkle was added by Mr. Theodore J. Kord's lighting effects. Messrs. Tom Laramee and George Membrino pleasingly vibrated tympanic membranes with their sound ministrations. Moreover, as unit production manager, Dr. Richard Paul with his assistant Dr. Jean Paul Aucoin "mother-henned" all the proceedings.

With such behind-the -scenes backing, the cast not only could but in its own rights did render a performance worthy of unreserved ovations unstintedly "oléed" by the audience repeatedly during the show and prolongedly after the final curtain. Starring were: Dr. Roger E. Parenteau, Dr. Carlo Montori, and Mrs. Joseph O'Hara, III. Co-starring were: Dr. David Booker, Dr. Robert Kelley, Dr. James Fisher, Dr. Kenneth McEwen, Dr. Garry deN. Hough, III, Dr. Robert Ernst, Dr. Field Leonard, Dr. Lester Suzor, Mrs. Robert Ernst, Mrs. John Zadworny, and Mrs. Bruce Alicandri.

Then came the Dollies: Mrs. Jean Paul Aucoin, Mrs. Maurice Boivin, Mrs. J. Richard Chabot, Mrs. Charles S. D'Avanzo, Mrs. Leandre W. Giguere, Mrs. Edward I. Kraus, Mrs. Aldo J. Leani, Mrs. Roger E. Parenteau, and Mrs. Richard V. Paul.

Adding to the lustre as special guest stars were "The Musigals" from the University of Mass.

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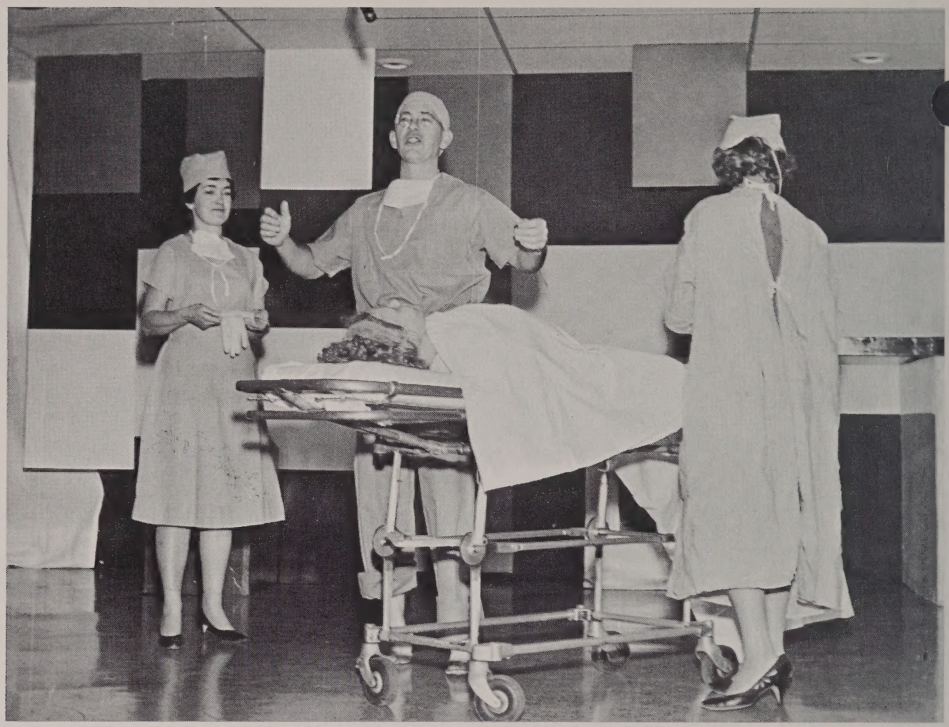

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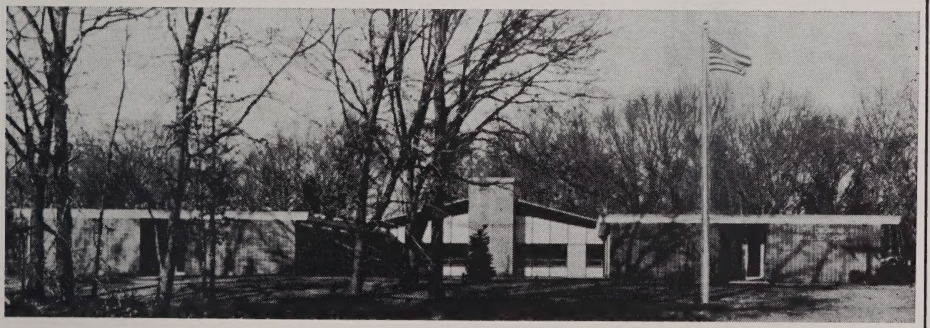

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